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October 2004

A Health Exception

By J.C. Willke, MD

"Health" was defined by the US Supreme Court. It said abortion could be performed: "In the light of all factors — physical, emotional, psychological, familial, and the woman's age — relevant to the well being of the patient. All these factors may relate to health."

Roe vs. Wade, Jan. 22, 1973

In its companion decision, the court stated: "Maternity or additional off-spring may force upon the woman a distressful life and future. Psychological harm may be eminent. Mental and physical health may be taxed by childcare. There is also stress for all concerned, associated with the unwanted child, and there is the problem of bringing a child into a family already unable, psychologically or otherwise, to care for it."

Doe vs. Bolton, Jan. 22, 1973

In a concurring opinion, Justice Douglas stated that health included if she had to: "endure the discomforts of pregnancy; endure the pain, higher mortality rates and aftereffects of childbirth; abandon educational plans; sustain loss of income; forgo the satisfactions of careers; tax further mental and psychological health in providing childcare, and, in some cases to bear the lifelong stigma of unwed motherhood."

Roe vs. Wade, Jan. 22, 1973

As a result of the above decisions, the word "health" has become a legal term of art. The overwhelming majority of the general public thinks of it as physical or maybe emotional health that would serious-

ly threaten the life of the mother. In fact, when "health" is in a law, it guarantees abortion-on-demand until birth. It can be briefly described as including physical and social well being as defined by the woman



Images Courtesy of Anthony Levatino M.D.

herself. Every attempt in law to directly limit abortion has stumbled on this rock. Most recently, we have seen three federal district courts in California, Nebraska and New York enjoin the new federal ban on partial-birth abortions. All three of them referred directly to the fact that it did not have a "health" exception. Two of these judges, by their history and writing, were clearly pro-abortion sympathizers. Judge David Casey in New York, however, was clearly different. He asked very piercing questions requiring extremely vivid detailed and graphic answers. As the case proceeded in front of him, many of us became more and more hopeful that his decision might be to uphold the law. Sadly, we were to be disappointed. Judge Casey had forced them to admit abortions kill live babies who experience excruciating pain during the abortion. He found that the pro-

abortionist's attempts to partial-birth justify abortions were "false, incoherent or merely theoretical." He rejected their contention that partial-birth abortion was sometimes justified for medical reasons and called the procedure "gruesome, brutal, barbaric and uncivilized." But in the end, he enjoined the law. Why? He said that he had to, citing the above cases and the more recent US Supreme Court case in

2000, Stenberg vs. Carhart. Judge Casey said that a health exception is constitutionally required, so he was bound to rule

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Life Issues Today with J. C. Willke, MD



The First Week of Life, Words We Use

"Stem cells," "cloning," "emergency contraception," all of these are being discussed to a degree and with an intensity that has never before existed. Inappropriate or flatly deceptive wording is clouding much of it. Therefore, it is of extreme importance that we consistently use the right pro-life language and not fall into their semantic shadings and distortion. Let's review some of this wording.

"Stem Cells"

They like to say these cells are "harvested," but harvest is a positive word—the end of a growing season, a successful planting or a bountiful harvest is what we think of, and none of these apply here

They sometimes, and sadly most of us almost all of the time, speak of "destroying" stem cells. But that is not the best word either. We destroy things. We kill people. When you use the word destroy, you subtly undermine their humanness, reducing them to an inanimate "it." When we speak of killing human embryos, we bring the reader up very short, for it is obvious that you only kill humans, therefore you are testifying to their humanity. While we are at it, human embryos are not an "it." A human embryo is already a him or her from the first cell stage (X and Y chromosomes). In referring to a human embryo it is best to say, "kill him or her, or he or she implants..."

"Fertilized Egg"

Pro-lifers make this mistake inadvertently while pro-abortion people do it with clever calculation. A fertilized egg, or zygote, is the first cell stage and exists for only 24 hours. After cell division, this is no longer a fertilized egg. We then use several other names, which are incomprehensible to the general public, but one name covers them all and that is "embryo." So after the first day, he or she is a "living human embryo." Most importantly, "fertilized

eggs" do not implant within the womb. There is a certain power to their sneering comment, "Why would you want to protect a fertilized egg from planting?" It makes a difference if you say, "Why would you want to prevent a living human embryo from planting?"

"Cloning"

We hear there are two types. This is incorrect; there is only one type. They speak of reproductive and therapeutic cloning, "reproductive" being when the new living human is planted and carried to term and delivered. "Therapeutic" is when "it" will not be planted in a womb, but will and be experimented upon "destroyed." We can accept the term "cloning for reproductive purposes," but it is best not to use "reproductive cloning," for that indicates there are other types. "Therapeutic" cloning is a total lie, for there is nothing therapeutic about this. President Bush uses the term "research cloning" which is quite adequate and accurate. But since they don't allow these tiny humans to live when they are done with their destructive research, very commonly the best words to use are "clone and kill." Finally, they often now don't use the word "cloning" at all because it is too negative. They use the term "somatic cell nuclear transfer." This is the scientific term for cloning, however it does confuse the public and sounds awfully important and scientific. From our standpoint we should not use those four words. Let's call it "cloning."

"Embryonic Stem Cells"

This is a perfectly legitimate way of describing these cells. The other types are "adult" stem cells or, better, "non-embryonic stem cells," which includes stem cells from the umbilical cord. Never pass up the opportunity of describing how embryonic stem cells are obtained. You take a five-day-old living human embryo, cut him or her open, and extract embryonic

stem cells from the inside. Obviously, to obtain these cells you must kill a living human embryo.

"Human Life"

But does human life begin at the first cell stage? We have all been asked this question and will be in the future. Your answer must be very scientific. Each one of us was a zygote, a fertilized egg, a single cell; and all we have done has been to grow up. At that first cell stage, we were alive. We were not dead. Our single cell body was programmed by nature to proceed in an ongoing, self-controlled pattern of growth and maturation, ending only when the old man dies. We were human as identified by human chromosomes. We were not a carrot nor a rabbit. We were sexed, i.e. male or female, as shown by X and Y chromosomes at the beginning. Very importantly, we were complete, for nothing has been added to the single cell whom each of us once was, nothing but nutrition and oxygen. All we have done since we were a single cell is to grow up. There is no scientific way of drawing a line in time before which you can say, "He was not human," and after which you can say, "He is."

Conclusion

So, in your debate, your opponent has no answer; they cannot dispute when you say, "You and I each once were a single cell, a zygote." This is a medical fact, which is undeniable. What your opponent wants to do is assign a different value to an existing human life at whatever stage your opponent chooses. So the argument is not about whether human life exists, it does. The argument is about the value that you, they or our government places on human life and at what stage in his or her growth.

Words are of immense importance. They are, when face to face in direct discourse. They also affect the listener's unconscious. Use them wisely. They are tremendous tools.

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against the law.

The Partial-Birth Abortion ban in question had been carefully tailored. Previous court decisions against partial-birth abortion bans had basically given two reasons. One was lack of clarity, stating that it could be confused with the earlier and quite different dilatation and evacuation, which is a live dismemberment inside of the uterus. This new federal law, whose prime sponsor was Congressman Steve Chabot, quite clearly delineated the difference. They couldn't hang their decisions on vagueness this time.

The other objection was the lack of a health exception. Congressman Chabot and his committee had labored long and hard and came up with several pages of expert medical testimony. This included medical facts proving conclusively that there was no legitimate health reason for doing a partial-birth abortion. Even so, at least in these three lower court decisions, it seems that the health exception required by the US Supreme Court was non-negotiable.

These three cases will likely be appealed. It is not the role of a federal district court to change laws. Appellate courts can do so, but the Supreme Court has the power

and tradition and could, of course, accept the new Chabot federal law if it wished. Pro-life veterans, however, are not betting the mortgage on such a change by the High Court, at least not if the current membership sits in judgment.

The New Ohio Law

Ohio was the first state to pass a law forbidding this gruesome procedure. It was called a "brain suction bill." It forbad this procedure but swept more broadly, pro-

hibiting all late-term abortions. The US Supreme Court enjoined it.

Benefiting from Ohio's groundbreaking experience, Congressman Canaday crafted a new bill in the US House of Representative and renamed it, "Partial-Birth Abortion." This bill passed but was vetoed by President Clinton. A second pas-

sage, several years later, met the same fate.

In the meantime, almost half of the states had passed their own bans on partial-birth abortions. Two of these cases, Nebraska and

Wisconsin, made it to the US Supreme Court, which struck them down in *Stenberg vs. Carhart*. The reasons given were vagueness and lack of a health exception.

Benefiting from all of the above, Ohio proceeded to pass a second law. This

one very clearly described the procedure, thereby eliminating any "vagueness." Unlike the federal laws, it did include a health exception. By doing so, it plowed new ground for this type of bill. From the

time of the Supreme Court Casey decision in 1992, Ohio had noted that a health exception in their protective bill had not been challenged and has remained in force. The Casey decision did not strike its health exception, which had very tight wording. It stated that "health" meant when it is "necessary in reasonable medical judgment to preserve the life or health of the mother, as a result of the mother's life or health being endangered by a serious risk of substantial and irreversible impairment of a major

bodily function." Under the Casey law, abortion in Pennsylvania was forbidden after 24 weeks and allowed after that only when this new health exception applied. Information from veteran pro-life activists tells us that since 1992 there have only been two abortions done in that state after 24 weeks. Clearly, this particular health excep-

tion wording has been almost totally successful in limiting late-term abortions in Pennsylvania.

As a result, the newer Ohio ban on partial-birth abortion incorporated a health

exception but used the exact same wording that was operational in Pennsylvania and had not been challenged.

Dayton, Ohio is the home of Martin Haskell, the original abortionist who pioneered the partial-birth abortion. He challenged the new Ohio law, which was enjoined by a Federal District Court. It went to the Sixth Circuit Court of Appeals. There, on a two to one vote, the Ohio law was declared constitutional. He asked for an *en banc* decision of the entire Sixth Circuit. It considered the case and voted to agree that the law was constitutional.

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Where Do The Candidates Stand on Abortion?



George W. Bush

John Kerry

Partial Birth Abortion

President George W. Bush promoted and signed the Partial-Birth Abortion Ban Act into Law.

Senator John Kerry voted against the Partial-Birth Abortion Ban Act every chance he got — six times.

The partial-birth abortion procedure — used from the fifth month on — involves pulling a living baby feet-first out of the womb, except for the head, puncturing the skull and suctioning out the brain. The great majority of partial-birth abortions are performed on healthy babies of healthy mothers.

Abortion on Demand

George W. Bush opposes the 1973 Supreme Court decision that legalized abortion on demand, and he supports legal protection for unborn children.

John Kerry supports the 1973 Supreme Court decision that legalized abortion on demand — even as a method of birth control.

Government Funding of Abortion

George W. Bush opposes using tax dollars to pay for abortion. During his first week in office, President Bush reinstated the Mexico City Policy, which cut off tax funds to groups that promote abortion overseas.

John Kerry supports using tax dollars to pay for abortion. Kerry said that his first executive order would be to "reverse the Mexico City Policy," and thereby give tax funds to groups that promote abortion overseas.

Record on Life

George W. Bush has repeatedly supported legislation which would protect unborn children and people with disabilities.

George W. Bush signed "Laci and Conner's Law," which recognizes as victims unborn children who are killed or injured in violent federal crimes.

George W. Bush supported legislation to prevent minor daughters from being taken across state lines for secret abortions in order to avoid parental notice laws.

John Kerry, during his 20 years in the Senate, voted 79 times to support abortion.

John Kerry voted against "Laci and Conner's Law," which recognizes as victims unborn children who are killed or injured in violent federal crimes

John Kerry voted against notifying a parent before performing an abortion on a minor daughter.

Supreme Court Appointments

George W. Bush stated that he will appoint Supreme Court justices who share his conservative philosophy and who will strictly interpret the Constitution according to its text. (The text of the Constitution contains no right to abortion.)

John Kerry has stated that if elected president he would appoint only Supreme Court justices who support the 1973 Supreme Court decision that legalized abortion on demand. He declared, "...I will support only pro-choice judges to the Supreme Court. Some may call this a litmus test..."

Source: National Right to Life Committee

Republican Party Plank on Abortion

"The unborn child has a fundamental individual right to life which cannot be infringed. We support a human life amendment to the Constitution, and we endorse legislation to make it clear that the 14th amendment's protection applies to unborn children. We oppose using public revenues for abortion and will not fund organizations that advocate it. We support the appointment of judges who respect traditional family values and the sanctity of innocent human life."

Democrat Party Plank on Abortion

"We stand proudly for a woman's right to choose, consistent with *Roe vs. Wade*, regardless of her ability to pay. We stand firmly against Republican efforts to undermine that right."

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TeenBreaks.com Fills the Pro-Life Void

Later this fall the Rosetta Foundation will launch an all-new, pro-life website specifically designed to reach Generation Y.

TeenBreaks.com is geared to develop and solidify pro-life values during that crucial time period between the ages of ten and twenty when values and behavior are established in the still developing teenage brain.

At 60 million strong (compared to only 17 million Generation X) and highly receptive to the pro-life message, Generation Y is our best shot yet at actually changing the culture on the abortion issue.

Consider these facts:

- Currently, when teens do a keyword search on "abortion," there are very few "teen" websites appearing on that all-important first page of sites on either the Google or Yahoo search engines.
- Google and Yahoo (Overture) are the largest search engines in the world, feeding other search engines as well, and will produce over ten million sites on the keyword "abortion."
- Teens will choose a site with "teen" in the name before other sites that are presented.
- The Rosetta Foundation is committed to out-bidding the abortion sites and clinics to have TeenBreaks.com appear in the first, second, or third spot for the "abortion" keyword.

TeenBreaks.com will fill this void!

There is almost no other pro-life group in the country specifically targeting these teens at this level on their medium of choice — the Internet. Based upon extensive research and experience with a prototype teen website, TeenBreaks.com will

provide easy navigation for all the life issues affecting teens.

Whether searching for "abortion" for a school research paper or to end a pregnancy, they will be immediately presented with abortion sections providing information in a non-technical language, such as:

- Girls who aborted True personal stories by other girls.
- What is abortion? Descriptions of abortion procedures and abortion photos, if they choose to view them.
- Abortion docs speak Testimonies by Dr. Nathanson and other abortionists who quit and now speak out.
- Abortion complications/girls Information on both immediate and longterm physical and mental complications.
- Abortion complications/guys —
 Information on the little talked about short and long-term impact on the fathers of aborted children.
- Abortion survivors Testimonies of survivors of abortion attempts, survivors whose twins were aborted, and survivors whose siblings were aborted.

Other equally comprehensive sections are entitled Pregnancy, Adoption, Hooking Up (this is where we cover abstinence), Confidence, and Thoughts.

Pregnancy covers everything from "Life B-4 Birth" to personal stories of girls who parented, girls who adopted, and girls who aborted, as well as a section of "Might be Pregnant?" and a "Pregnant? Need Help?" cyberconnection to the pregnancy center network Optionline.org. The "Life B-4 Birth" section covers fetology from conception to birth with pictures, but is written as your life began..., you grew..., etc., with a heavy emphasis on the uniqueness of your life to personalize the baby



before birth.

Adoption is another important section, as research has shown how very little teens know about it. They have almost no knowledge and even a fear of adoption, resulting in adoption not being an option in their minds in a teen pregnancy. There will be inspiring stories of birth mothers, adoptive parents, and adoptees, as well as facts and information on the adoption process, ending with a section called "Right for me?"

Hooking Up is part of the new language for teen relationships and will cover relationship problems, peer pressure, and sex — yes/no. Research and experience has shown that before abortion and pregnancy comes the initial problem of teen sexual activity, which must be addressed. It is the precursor of most all future problems — resulting in low self-esteem, depression, and the destructive behaviors of drug and alcohol abuse, self-cutting, eating disorders, etc.

Confidence will be devoted to building self-esteem and confidence through inspiring and courageous stories, encouragement, problem solving, and help hotlines.

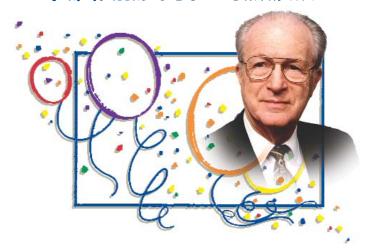
Thoughts is the interactive section for submitting personal stories, comments, suggestions, poems, etc.

As the website is now in the building process, anyone with teens wishing to submit stories, poems, etc., may do so at RosettaFound@aol.com. This website will be launched as soon as content and design are completed this fall. We'll keep you posted!

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STEVE FORBES

OUR KEYNOTE SPEAKER WILL BE STEVE FORBES, FORMER PRESIDENTIAL CANDIDATE AND EDITOR IN CHIEF OF FORBES MAGAZINE.

OUR MASTER OF CEREMONIES FOR THE EVENING RECEPTION AND BANQUET WILL BE OHIO SECRETARY OF STATE. KEN BLACKWELL.



KEN BLACKWELL

Don't miss this momentous celebration!

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Haskell formally decided not to appeal to the US Supreme Court. The Sixth Circuit then immediately ruled that the law would be in force in Ohio and constitutional throughout the Sixth Circuit. Therefore, if the states of Michigan, Kentucky and Tennessee also passed this legislation, it would be in force unless appealed to the US Supreme Court.

As of this writing, it is too early to know whether or not Haskell will try to get around the law in some other fashion. Clearly, there are other ways of killing lateterm babies, and Ohio's law forbids only this one procedure. He and others are free to kill late-term babies through the equally gruesome D&E method, i.e., reaching up into the womb and tearing arms and legs off of the live baby and pulling these and the rest of the body out of the mother.

The Future

No one knows what the future holds, but much will depend on the upcoming presidential election. If John Kerry is elected, the situation will be desperate for at least four more years and perhaps much longer because of his likely new Supreme Court appointments. If President Bush is re-elected, the hope exists that his appointments to the US Supreme Court may well tilt the balance against Roe vs. Wade.

However the above plays out, the controversy over partial-birth abortion has had an immense impact on our nation. No, it hasn't saved any babies yet. Most agree that the abortion industry can kill late-term babies by other methods. True enough, but what this controversy has done has been to lay in front of our nation the whole grizzly mess.

Prior to this, it was generally accepted and continually reported by the press that abortion was only legal for three months of pregnancy. Now, our nation knows it is legal until nine months, and for social and economic reasons. Our nation knows that live babies, in the process of delivery, are being cruelly killed. Further, that over 90% of these babies are entirely normal and almost all of the pregnancies are not a health risk to the mother. It is during the years when this controversy has been aired, that we have seen a specific drop in pro-abortion support in the United States. During this time we have seen a sharp increase in Pro-Life support, particularly among young people.

The controversy continues. Two different partial-birth abortion bans are now in the public arena. We shall see.

Life Issues Connector



From the Executive Director

Bradley Mattes

Disguising Abortion to Look Like Labor

Words are important in our efforts to protect innocent human life. Those who promote abortion use a litany of euphemisms designed to de-humanize the child.

Here's the latest example. Some hospitals have incorporated late-term abortion into an institution previously dedicated to healing. These abortions are so late that the baby is often born alive. An accurate description is "live birth abortion." Even though the baby survives, the healthcare personnel do nothing to assist these babies as they struggle for life.

The hospitals' public relations and marketing teams don't like to use the "A" word. They know admitting to doing abortions would make them vulnerable to prolife pickets, media controversy and furious donors. To avoid all that unpleasant pandemonium, they've come up with a description to disguise the fact that they have joined the ranks of late-term abortionists. They call it an "early induction of labor." Translated, this means they deliberately put the mother into premature labor, knowing the baby will not survive without immediate medical attention.

In reality, it's a cold, calculated scheme to blur the line between spontaneous premature delivery and abortion. And it's become widespread.

Two prominent Catholic-affiliated hospital systems are committing late-term abortions on handicapped babies under the guise of "early induction of labor."

The Loyola University Health System and the Providence Health System (31 hospitals) have a written policy regarding live birth abortion. Both said they strictly adhered to the "Ethical and Religious Directives for Catholic Health Care Services." The Providence statement was more vague. However, Loyola University specifically said they delayed the abortion until the baby was twenty-four weeks old in the womb and considered "viable." In their corporate mind, this

doesn't qualify as an abortion and makes them compatible with the US Catholic Bishops' ethical and religious directives.

Viability is a scientific measurement to determine when an unborn child can live outside his or her mother's womb. But any healthcare provider knows that critical medical care is essential to every child at this age. Tragically, these babies have a symbolic scarlet "A" written on their foreheads and receive zero medical attention. There's even evidence that in some institutions, babies are actively killed by drowning or other means.

Loyola is quick to point out they only kill babies who are the victims of anencephaly or Potter's disease (underdevelopment of the brain and kidneys). This doesn't exonerate them. Quite the opposite — it further condemns them for discriminating against handicapped newborns. The fact that they kill only a small segment of society doesn't make the dirty deed any less vile.

Hospitals that participate in live birth abortions are putting their federal funding at risk. President George W. Bush signed the *Born Alive Infants Protection Act*. It states that children who are lucky enough to survive an abortion will be afforded proper medical care to sustain their lives. Herein lies the problem. Hospitals are either unaware of this federal legislation, or are thumbing their noses at it.

There is also the possibility that the *American With Disabilities Act* may be a way to prosecute wayward healthcare facilities. It can be eagerly argued a hospital that intentionally induces labor, and then ignores the baby's struggles for life, fully gets what it deserves within the parameters of law.

Jill Stanek, a registered nurse, was at the forefront of initially exposing live birth abortions. She testified before Congress to pass legislation to protect their lives. Now, Jill is hearing from nurses that live birth abortions continue to be commit-

ted in hospitals around the nation. Jill shared with me some of the alarming, first-hand accounts of so-called labor inductions.

A nurse in a Southern California emergency room reported her experience of seeing a premature birth and death of an infant:

"The focus turned to stabilizing the mom who was bleeding profusely. I felt so badly for her and tried to comfort. She was quite cold to my attempts, which, of course, raised suspicions. When mom's "primary physician" arrived on scene, we all realized that it was, in fact, an abortion. This was a perfectly formed 26-week baby. Someone laid her on a table. The image of that beautiful, perfect little infant haunts me to this day. I've seen it in my sleep."

At one abortion mill, a nurse witnessed horribly cruel acts:

"They put the babies in red biohazard bags when they were still moving . . . tied the bag up . . . put them in a biohazard box. The biohazard medical service would pick boxes up Monday and Thursday."

Jill said, "The Born Alive Infants Protection Act is like the proverbial tree that fell in the woods no one heard." As a nurse, she is ashamed of the medical profession. Jill said, "I shouldn't have to remind so-called Christian hospital administrators, ethicists and theologians that they are called to protect — not destroy — the most vulnerable and sickest among us. They are called to help parents bear the unbearable loss of a child, not trigger it."

While legal and civil options are being pursued, you can go to pro-life healthcare professionals in your local hospital(s). Ask them to investigate and find out whether or not it is involved with "early induction of labor." If so, immediately get in contact with Jill Stanek. You can reach her at: Jill Stanek, 11664 Sundance Trail, Mokena, IL 60448. E-mail jill@jillstanek.net. Cell: 815-274-2744. Home: 815-464-0984.



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